

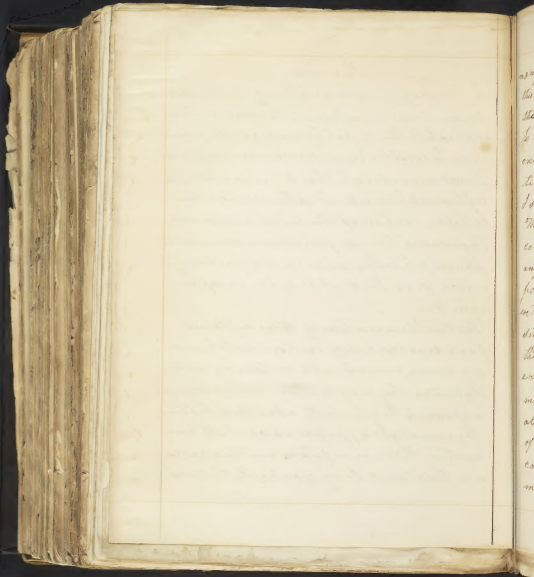
an
Inaugural dissertation
On
Pneumonia
by
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Capitol March 1827
W. E. H.

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Pneumonia

In treating of inflammation of the thoracic viscera, it was the custom of the older writers and is still the habit of many of the present time to consider it under several different heads: according to the part in which the inflammation was located: when the cellular texture of the lungs is inflamed the disease is termed peripneumonia, when the pleura, pleuritis, when in that portion of it which covers the diaphragm, parapneumonitis &c.

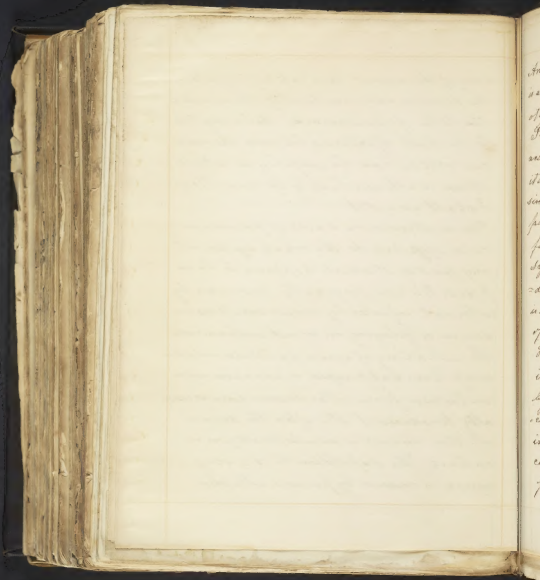
That inflammation of these different parts do occasionally exist separately, and are accompanied with certain symptoms by which they may be sometimes distinguished appears to be generally admitted but from the very slight difference which at all times exist in their symptoms and their causes and treatment, being essentially the same,



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many of the medowns have entirely rejected this division, and now treat of them under the title of pneumonid. Believing this to be least objectionable and the only one which can be employed at all times with certainty in practice I shall adopt it.

The most common cause of pneumonia is cold applied to the whole system or to any part of it which happened to be exposed. It is also frequently produced by external injuries by violent exertions in singing or playing on wind instruments. the inhaling of acrid particles, vespetal eruptions suppressed evacuation and metastases from other diseases have occasionally produced it. It is often the sequel of other diseases, as measles small pox or catarrh. The disposition to it is very much increased by previous attacks.



An excessive indulgence in spirituous liquors
is a very frequent cause of this disease in many
others.

Pneumonia attacks persons of every temperment
and at any period of life, but most frequently
it is stated by Dr. Sullen from forty five to
sixty. The characteristic symptoms of
pneumonia, are fever, pain in the chest, dif-
ficult respiration and cough. But these
symptoms are very much modified accord-
-ding to the part in which the inflammation
is seated, and the condition of the part at the time
of attack.

In the commencement of pneumonia there
is generally languor and lassitude, followed
by a slight shivering or rigor, to this suc-
-ceeds an increase of heat, a sense of uneasiness
in the chest a slight cough, dryness, high
coloured urine, hurried respiration, the
pulse more frequent than natural. After

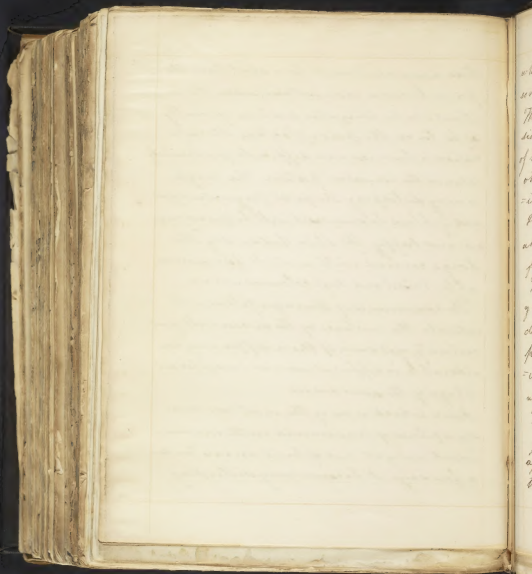
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these have continued for a short time the pain become more intense when the patient is in the horizontal position, especially if he lie on the part affected. the respiration is hurried and difficult particularly when in the recumbent posture, the cough is very distressing, the pulse frequent and full and if blood be drawn it will be found cupped and buffy. the skin hot and dry the tongue covered with a white fur, considerable thirst and high coloured urine.

The concurrence of these symptoms will indicate the existence of the disease with great certainty, yet some of them differ very considerable in different cases and in different stages of the same disease.

Pain which is one of the most common symptoms of pneumonia in the commencement is slight, but after it has existed for a few days, it becomes very distressing

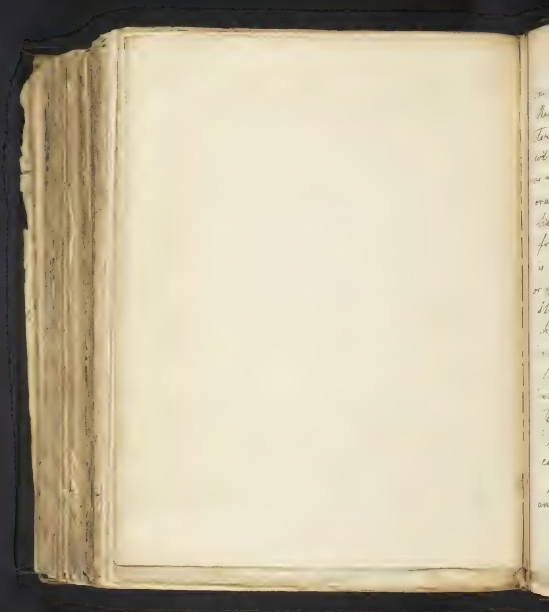


when the patient is in a horizontal position
so much so that he is obliged to assume an upright one.

The pain generally remains fixed in the
side near the middle is a little an thro' out
of the sixth rib. but it occasionally occurs in
other parts, as under the sternum, the clav-
icle, scapular and between the shoulders
At some times shoots in various directions
at others it merely shifts its position
from one side to the other.

The respiration in the commencement is
generally very little disturbed. but as the
disease advances, it becomes short and is not
performed with very great efficiency owing
to the lung being in an inflamed state
and not dilating its cavity.

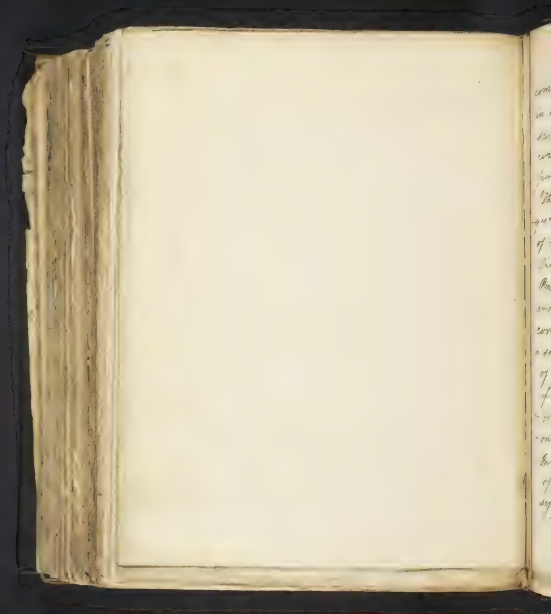
If ~~not~~ attacked in its commencement and
properly treated there is no inflammatory
abscession which is more completely under
the control of the physician than the



in under consideration

Resolution therefore is the most common termination of it, which is always attended with some very evident evacuation, such as a profused warm perspiration, a haemorrhage from the nose, the appearance of haemorrhoids or diarrhoea, but the most frequent and at the same time most salutary is that of a copious expectoration of whitish or yellowish mucus which is frequently streaked with blood. After this has taken place the pulse becomes slower softer and more regular, the breathing more free and easy, the pain to diminish and in a few days the patient is restored to health.

If then the disease is neglected in the commencement or if attended to and the proper remedies are not employed and the inflammation is violent from the



commencement it frequently terminates in an effusion of blood into the cellular substance of the lungs, by which the circulation is impeded and suppuration produced.

This termination is indicated by a turgescency and fullness of the blood vessels of the neck and a lived appearance of the countenance.

Pneumonia may also terminate by suppuration, which may be known by the coming on of rigors, the pain diminished, a sense of weight in the chest, the expectoration of purulent matter, the pulse becoming fuller and softer, the urine depositing a copious sediment, and the accession of hectic.

In forming an opinion as to the result of the disease we must be governed by the symptoms which are present.

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When fever is violent, accompanied with difficult and laborious respiration the pain more intense thirst considerable the skin dry, the countenance assuming a livid appearance, a dry cough or accompanied with the expectorations of a dark colour, scanty urine, irregular pulse, cold sweat and coma indicates the near approach of a fatal termination on the contrary when there is a diminution of the febrile heat the pulse becoming more regular and soft a copious and free expectoration the tongue becoming clean at the edges a copious and diffused warm perspiration and the urine depositing a cream coloured sediment marks the decline of the inflammation.

On dissection the lung and its membranes will be found in an inflamed state



lungs themselves of a livid or even
ecchymous color and long them. They
they are found to be covered by a na-
tural covering of an effusion of serum. The
pleura is also frequently found
within the cavity of the chest and paracostum.
The pleura covering the lungs found
in an inflamed state is surface raising
the inflamed lung covered with red
spots. Some times coagula by me it is
thrown out by which the pleura is at-
tached to the lung. One or more abscesses
are some times found in the lungs.
In the treatment of pneumonia from
a consideration of the important function
which the diseased part performs the
indication and the rapid progress of the
disease and the very great tendency
to immediate lung effusion is to be
met by immediate action from a full

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and immedial in their effects.

Therefore in the commencement of an attack of pneumonia where the patient is robust and of a plethoric habit, blood should be drawn from the arm and by a large orifice untill pain and difficulty of breathing are relieved or untill the patient becomes sick or faint. This operation it will be necessary, frequent to repeat the same or next day to an equal extent and in some to detract even a greater quantity of blood. In the further employment of this remedy we must be governed by the severity of the pain the difficulty of breathing the tenor and fullness of the pulse, these must be reduced without delay and although there are other remedies which are very useful in this stage it is on



resection that we are to rely

The appearance of the blood shown
will also assist in forming an opinion
as to the propriety of the further employ-
ment of the remedy. For when it is
covered with a buffy coat and cupped
accompanied with a frequent and hard
pulse there can be but very little doubt
of the propriety of it.

The disappearance of the buffy coat
generally indicates a subsidence of
the inflammation.

If from the violence of the disease
or from its being neglected in the com-
mon course it should pass on to sup-
puration then then it will be necessary
to employ resection with great
caution and in small quantities at all.
Topical blood letting by leeches or
cups may be employed with great

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advantage with venesection when there is much congestion. They should be applied immediately over or as near as possible to the pained part. They are also very useful in those cases when the force of the circulation has been reduced by venesection and a slight degree of pain still remains or when from previous bad habits or ill health the patient will not bear general blood letting to any considerable extent.

With the view of alleviating pain fomentations and cataplasms should be employed, provided their application would not interfere with that of a blister which is decided by previous action of the force of the circulation has been reduced.

After the inflammatory action has been moderated or considerably reduced, the

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application of a large blister over the
pained part or as near as possible may
be employed with very great advantage
with the view of removing it should
the first application not be sufficient
the discharge should be continued
by the application of another blister.
In the commencement of pneumonia
should costiveness prevail it will
be advisable to evacuate the bowels
thoroughly. For this purpose a dose
of the sulphate of magnesia or soda
should be administered. After
the bowels have been thoroughly
evacuated in the early stage of the
disease it will be sufficient afterwards
to keep them in a soluble state
to accomplish which the milder
laxatives should be employed as
more active articles by inducing

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copious purging evidently have
a tendency to diminish expectoration.

During the first stage of the disease
when there is considerable febrile
heat with a dry cough and pain in
the chest it will be advisable to give
mild diaphoretics such as small
dose of tartarized antimony frequently
repeated which by relieving the
surface and promoting expectoration
afford very great relief. The saline
mixture and nitre may also be employed
with the same intention.

The *asclepias tuberosa* has been a good
deal employed in this disease in the
United States and it appears with
very decided advantage. It is generally
given in a strong decoction every hour
or two, with the view of promoting
the secretion of these medicines. The



patient should be directed to take frequent
small drinks of some mild fluid, as barley
water rice water or flower seed tea.

The employing of peditumura in the evening
where care is taken to dry the parts perfectly
of towards, will add greatly to the comfort
of the patient during the night.

As copious expectoration being the means which
nature usually resorts to for relief in inflam-
matory affection of the chest it should be
promoted by every means in our power.

For this purpose small and nauseating doses
of tartar emetic frequently repeated have
been found most useful and may be employed
in any stage of the disease, when not for bidden by
the state of the stomach. Ipecacuanah may
also be employed in the same manner and
with very good effect. Mild and tepid
drinks taken in small quantity and
frequently repeated by allaying the vom.

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tion which exist about the puerca and
aggravates the cough, so as to prevent the matter
from remaining in the lungs, untill it become
of a proper consistency to be expectorated
with ease, may be employed with very great
advantage and should not be neglected.

The inhalation of the steam of warm water
and vinegar has been found greatly to facili-
tate expectoration. A combination of Hoffman's
anodyne liquor and laudanum when breathed
for a half hour or more at a time we are told
have been found very useful in allaying the
irritation which exist about the throat and puerca
From the great pain which the patient suf-
fers during the inflammatory stage of the
disease from the distressing cough which accom-
panies it and consequently the want of sleep
opiates appears to be indicated but the expe-
rience of most practitioners is decidedly against
it untill the inflammatory symptoms

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are subdued. after this should enough
remain so as to aggravate the pain and prevent
sleep opiates may be employed and with
very beneficial effects.

During the inflammatory stage of the disease
the diet should be conformable with the gen-
eral plan of treatment, namely to diminish
the quantity of the circulating fluid and
thereby diminish arterial action. Therefore
the most bland articles must be chosen, for
this purpose such as tapioca, sago rice barley
water roasted apples and other fruits of the
season. During the state of convalescence
the patient should observe the greatest
caution and regularity in his diet and
should carefully guard against any
sudden atmospheric vicissitudes, as
the disease is very apt to return from
any fresh exposure.

